



**Lichtenstein Creative Media**  
**10 Years of Strategic Communications and**  
**Social Marketing Campaigns**  
**to Reduce the Stigma of Mental Illness**

**Lichtenstein Creative Media, Inc.** is an award-winning independent media production company located in Cambridge, MA. LCM has extensive multimedia production, distribution and educational/community outreach experience, particularly with mental health, human rights and social justice issues. LCM is also the creator of groundbreaking mental health educational and social marketing campaigns utilizing media and strategic communications.

LCM was founded in 1990 by Bill Lichtenstein, a former investigative producer for ABC News *20/20*, *World News Tonight* and *Nightline*, following his diagnosis and recovery from manic depression. His work, and that of LCM, has been honored with more than 60 major broadcast awards for coverage of mental health and related social issues, including: a 2005 Guggenheim Fellowship; a George Foster Peabody Award for Excellence in Broadcasting, TV and radio's highest honor; a Media Award from the United Nations; six National Headliner Awards; four Gracie Awards from American Women in Radio and Television; and five Unity Awards in Media from Lincoln University of Missouri for coverage of minority issues. LCM has also received honors from the major national mental health organizations, including top media awards from the National Institute of Mental Health, National Mental Health Association, National Alliance for the Mentally Ill, the American Psychiatric Association, and the National Alliance for Research on Schizophrenia and Depression.

LCM produces **The Infinite Mind**, public radio's most honored and listened to health and science program. LCM also produced the recent, highly-acclaimed documentary film, **West 47th Street**, which follows three years in the life of four people with mental illness.

LCM has been working for nearly a decade to develop and utilize state-of-the-art communications, media and social marketing strategies to effectuate measurable changes in public attitudes, behaviors and policy with regard to mental illness and mental health care. In recent years, LCM has worked with a variety of non-profit and governmental organizations on the design and implementation of mental health strategic communications and social marketing campaigns. This includes:

- A three-year mental health anti-stigma campaign, created under contract with New York City, which included the first major qualitative and quantitative research into what people in a single city thought about mental illness and what it would take change their attitudes. (1994 – 1996)
- The first primary research, conducted in partnership with the American Psychological Association, just months after the September 11<sup>th</sup> attacks, into who was recovering from trauma resulting from the terrorism – and who was not. (2002)
- A video on the success of community mental health crisis residential programs for the National Institute of Mental Health. (2000)
- Research and a video detailing the treatment of people with mental illness in emergency room care settings used to help train ER medical staff. (2003)
- Research and video targeting people newly diagnosed with depression, containing frequently asked questions by those newly diagnosed with the mood disorder, with answers from leading clinicians in the field. (2004)
- A video and outreach campaign targeting the families of people living with Borderline Personality Disorder, informed by the first primary qualitative research conducted into what had helped or hindered families and those living with BPD in recovering from the illness. (2006)

- Development of a Latino Mental Health Strategic Communications Campaign, with the goal of promoting increased diagnosis and treatment for mental illness, in collaboration with Dr. Sergio Aguilar-Gaxiola, University of California, Davis. (ongoing)
- Prevent College Suicide Campaign, which includes the first ever qualitative and quantitative research into the attitudes of college students regarding mental illness and its link to suicide. The research is also probing the reasons that students will – or fail to – reach out for help for a friend in need. The goal of the campaign is to develop the first “best practice” social marketing effort to increase college students’ awareness of the link between psychiatric conditions, which our research indicates that students have a high awareness of, and the risk of suicide. By doing so, the campaign will increase the number of college students seeking help for a friend in need, thereby saving lives. (ongoing)

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## **LCM’s Productions Include:**

### **The Infinite Mind:**

The highly-acclaimed national, weekly public radio series covers the broad array of scientific and cultural issues related to mental health, neuroscience and the biology of human behavior, and presents accurate, timely, and easily digestible information about such conditions as schizophrenia, bipolar disorder, depression, ADHD, pain, anxiety, autism and obsessive-compulsive disorder. The program also covers mental health treatment advances, the latest scientific research on the causes and treatments of mental illness, issues relating to access to “best practice” care, and is accompanied by ongoing, innovative, public education efforts to reduce the stigma that keeps many people from seeking help.

All too often, the mainstream media covers mental illness and its treatment in a manner that is superficial and sensational. Primary research conducted by LCM and others has demonstrated that media coverage, which all too often misinforms and distorts the nature of mental illness, is one of the central contributing factors to the widespread stigma of these disorders. This stigma results in millions of Americans remaining undiagnosed and untreated. Stigma also leads to discrimination and other social consequences for those affected by mental illness.

***Research also shows that the most powerful and effective means to change these public perceptions are the first-person accounts of people living with mental illness, particularly those who have recovered, “telling their stories,” along with increased public exposure to the latest research on the underlying biological causes of these illnesses and their treatment.***

For more than a decade, **The Infinite Mind** has been the only broadcast exploring the mind and mental health on an ongoing basis, week in and week out. Each week, more than one million listeners across the country tune into the program with its unique mix of world-leading scientists and clinicians, first-person accounts, special reports, essays, listener calls, and relevant author readings, and musical performances.

By doing so, the series has helped create an innovative national dialogue on mental illness that helps to counter misinformation and distorted reporting and a climate where people can be more openly diagnosed and treated. The series is coupled with cost-effective, national educational outreach efforts, carried out in conjunction with leading major mental health organizations. These community engagement efforts facilitate partnerships between local mental health advocates and professionals and their community public radio broadcasters, in order to help localize the issues covered by **The Infinite Mind’s** programs and extend the reach and impact of the series.

### **West 47th Street**

This award-winning feature length documentary film follows three years in the life of four people with mental illness. At times hilarious and at other times tragic, **West 47th Street** was winner of "Best Documentary" at the Atlanta Film Festival and DC Independent Film Festival, and sold out theatres across the U.S. and internationally from Vancouver to Paris to Dublin to South Korea. The film aired on the PBS series P.O.V., and was called "must see" by Newsweek and "remarkable" by the Washington Post. It was accompanied by a 100-city educational outreach campaign, with screenings held at such venues as Grand Rounds at Yale Medical School, the Carter Center, the Department of Homeless Services in California's Santa Clara County where it was used to train outreach staff, and in New Mexico, where mental health workers screened it for Native Americans in psychiatric hospitals throughout the state.

### **If I Get Out Alive**

Narrated by Academy Award-winning actress Diane Keaton, this public radio documentary was the first to highlight the brutal conditions faced by young people in adult jails and prisons. The program received numerous honors including a National Headliner Award, a Casey Medal for Meritorious Journalism, and a PASS Award from The National Council on Crime and Delinquency. The documentary aired nationwide on public radio stations, and was re-distributed to all California public radio stations, in March 2000, in conjunction with the statewide vote on Proposition 21, which made it easier to charge juveniles as adults. More than half of the 36 public radio stations in California aired the program in the weeks before the referendum, with many presenting on-air discussions featuring national juvenile justice experts.

### **Voices of an Illness**

The Peabody Award-winning series, the first to feature people who had recovered from serious mental illness – telling their own stories in their own words - has provided millions with an extraordinary window on living with serious mental illness since the series premiere in 1992. The programs on clinical depression, manic depression, and schizophrenia were narrated by Rod Steiger, Patty Duke, and Jason Robards. This three-part series, called "*remarkable*," by Time magazine, was created by Bill Lichtenstein as a way of relating his own experience following his recovery from manic depression.

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### **Bill Lichtenstein**

#### **President, LCM**

#### **Senior Executive Producer, The Infinite Mind**

Bill Lichtenstein's award-winning documentary work in television, film and radio spans nearly 35 years. He founded LCM in 1990 to produce high-quality film, television and radio productions dealing with mental health, human rights and social justice issues. More recently, Bill and LCM have begun working with government and non-profit organizations seeking to develop more effective mental health communications strategies. Bill created and is Senior Executive Producer of **The Infinite Mind**, and was co-director and co-producer (as well as serving as director of photography) of the award-winning documentary film, **West 47th Street**.

Bill has become a recognized leader in the area of mental health. He is on the advisory council of the Center for the Advancement of Children's Mental Health at Columbia University, on the advisory board of Families for Depression Awareness, and was a member of the program committee for the Carter Center mental health symposium on trauma. He also serves on NIH review committees, and is a frequent speaker on the subject of mental health and strategic communications, including a keynote speech at the recent SAMHSA's National Training Conference on Homelessness for People with Mental Illnesses and/or Substance Use Disorders; featured speaker at the NIH/Fogarty Center Conference on Disease and Stigma; and served as the keynote speaker at the 2005 Corporation for Supportive Housing national conference in Minnesota.

A graduate of Brown University and the Columbia Graduate School of Journalism, Bill began his work in television at ABC and CBS Sports. He later worked at ABC News as an Emmy Award-winning producer of investigative reports for the ABC News magazine **20/20** and as a field producer for **Nightline**, **World News Tonight**, and other ABC News programs. Bill's efforts at ABC focused on telling compelling human stories with a focus on overarching societal issues. Among them were: abused and dying children in Oklahoma; state institutions for the mentally retarded; battered women convicted of murdering their abusers; victims of faulty automobile design; and an Ohio town that fought back after being taken over by organized crime. Since 1979, Bill has been a member of the faculty of the New School for Social Research, where he teaches a course on documentary film production.

Bill has written on politics, health issues and the media for such publications as [The Nation](#), [Newsday](#), [Village Voice](#), [Entertainment Weekly](#), and [TV Guide](#). Bill's news photography has appeared on the front page of the [New York Daily News](#) and the [Baltimore Sun](#).

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# Attitude study on mental illness

‘Ground-breaking, significant’

## **What this study is about**

This research examined the attitudes of the New York City general public toward people with mental illness in the areas of employment, housing and personal relationship, and identified ways in which those attitudes can be changed.

It is the first survey of its kind ever conducted and has been called “ground-breaking and significant” by the National Institute of Mental Health and the Center for Mental Health Services of the U.S. Public Health Service.

The study was commissioned by the New York City Department of Mental Health, Mental Retardation and Alcoholism Services as the first stage of a three-year campaign to reduce stigma and discrimination against people with mental illness. Lichtenstein Creative Media, a New York City media production company, was contracted to conduct the campaign.

Three waves of quantitative research will be performed during the course of the campaign. This summary report covers the first wave, the benchmark results. Focus groups were conducted separately.

This research is important because:

- it provides, for the first time, valuable insight into public attitudes about people with mental illness and the factors that contribute to stigma and discrimination;
  - it enables the Department of Mental Health to develop the first public health/public education campaign on this issue based on firm, factual knowledge about public attitudes and perception;
  - it provides a benchmark for gauging the effectiveness of the campaign.
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## Methodology

### **How this study was conducted**

Researchers conducted a telephone survey of 504 adults residing in the five boroughs of New York over a period of 11 days in July, 1996. The phone numbers were selected at random. The sample was structured to provide an age and gender balance representing the populations of all five boroughs. Results are considered significant +/- 5%. The survey was conducted by Research Perspectives Inc. of White Plains for Kindred/Keziah llc of New York and Boulder, CO, under contract with Lichtenstein Creative Media.

## Findings

### **Why New York needs public education about mental illness**

#### **Stigmatizing attitudes**

Why should the Department of Mental Health conduct a campaign to change the way New Yorkers think about mental illness?

Consider these research findings:

- nearly half of New Yorkers say people with mental illness are unpredictable; that "you never know what they may do;"
  - 1 in 3 New Yorkers think that people with mental illness require the same discipline as a small child;
  - 1 in 4 New Yorkers would not feel comfortable hiring someone with a mental illness;
  - 1 in 7 New Yorkers say people with mental illness are dangerous and that they would not want to live next door to someone who had a mental illness.
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## **Lack of information**

In addition, research shows that New Yorkers are misinformed about the facts surrounding mental illness. Most New Yorkers underestimate the prevalence of mental illness and the likelihood that people with mental illness will be successfully treated.

The National Institute of Mental Health reports that about 1 in 10 people will suffer a mental illness in their lifetime.

But research shows 2 of 3 New Yorkers think the incidence of mental illness is much lower:

- 26% of New Yorkers think that mental illness only affects 1 in 100 people;
- 29% of New Yorkers think mental illness affects only 1 in 30 people.

The National Institute of Mental Health also reports that 8 of 10 people with mental illness can be successfully treated and can recover.

But most New Yorkers are not aware of that, either:

- 19% of New Yorkers think that only 1 in 10 people can be successfully treated.;
- 36% of New Yorkers think that only 3 in 10 people can be successfully treated.

## **Negative public images**

Research also provides some understanding about the underlying causes of stigmatizing attitudes. New Yorkers report that they are exposed to unnerving and sometimes violent images of people with mental illness. Most of these negative images come from the media and from encounters with people on the street.

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**Why a public education campaign will work**

Happily, the research also finds openness and receptiveness among New Yorkers that will provide a foundation for a successful adjustment in public attitude.

In contrast with the **negative public images**, New Yorkers report **positive personal experiences** with individuals they know who have mental illnesses.

The study found:

- Most New Yorkers say they personally know someone with mental illness.
- 9 of 10 people who know someone with a mental illness say they know the person has received treatment.
- Nearly 7 of 10 of that group say they know treatment was successful.

New Yorkers also want to do the right thing to help people with mental illness:

- Nearly 7 of 10 say more tax money should be spent to care for and treat those who have a mental illness.
  - 8 of 10 people say that we need to have more tolerant attitudes towards people with mental illness and that society has a responsibility to provide the best possible care.
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## Conclusion

### **What a public education campaign can do**

This study shows that New Yorkers hold conflicting views about mental illness: they have positive experiences on a personal level, but those experiences are contradicted by negative public images encountered in the media and on the street.

The research also shows that New Yorkers want to do the right thing to help people with mental illness.

New Yorkers already know from personal experience that most people with mental illness are not frightening, unpredictable or violent. They are friends, family, neighbors and co-workers who are successfully treated and go on to resume their daily life.

**A successful public education campaign should publicly validate New Yorkers' positive, private experiences.** People will shift their attitudes as they are made to see that their personal experiences reflect the norm, rather than the exception.



## **Many Americans Still Feeling Effects of September 11th; Are Reexamining Their Priorities in Life**

FOR IMMEDIATE RELEASE  
Monday, February 11, 2002

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A significant number of Americans are still feeling the mental health effects of the terrorist attacks on September 11th, and large majorities say they are reexamining their priorities in life, a new survey has found.

The survey, commissioned by The Infinite Mind public radio series and the American Psychological Association, also finds that people living in the New York area and people who have experienced past traumatic events are more likely than others to be showing signs of mental health problems five months after the attacks.

Greenberg Quinlan Rosner Research conducted the survey of 1,900 Americans from January 30th to February 2, 2002. The results are featured on an upcoming two-hour radio special of The Infinite Mind, entitled "State of Mind: America 2002," which will begin airing this week across the country.

Among the findings:

- \* Nearly one in four Americans (24 percent) report feeling more depressed or anxious today than at other times in their life.

- \* And while most of these Americans attribute their feelings of depression or anxiety to personal trauma or financial woes, 16 percent say their depressed or anxious mood is a direct result of September 11th. In real terms, there are about 8 million Americans who report they are feeling depressed or anxious because of the attacks on New York and Washington

The survey finds that the impact of September 11th is not limited to those areas directly hit in the attacks – 40 percent of Americans say that they were seriously affected by the terrorist attacks on a personal level.

The survey also shows that many Americans are bouncing back from the trauma:

- \* Eighty-one percent of Americans agree that in the aftermath of September 11th that they are trying to look beyond setbacks in their lives and move on.

- \* And only 21 percent of Americans say that they are worried that a member of their family will become a victim of a terrorist attack – down significantly from these worries in the immediate aftermath of the attacks.

“Without question the events of September 11th have had a real impact on this country’s mental health,” says Russ Newman, Ph.D., J.D., Executive Director for Professional Practice at the American Psychological Association. “Yet, this survey also shows that Americans are quite resilient and are working their way back from this tragedy.”

The survey also finds that Americans are reexamining their lives in light of the events on September 11th.

- \* More than three-quarters of Americans (77 percent) agree that they have tried to simplify their lives and focus more on what really matters.

- \* Seventy-one percent of Americans report having spent more time trying to gain perspective on their lives.

Significant numbers of New York area residents are still hurting, however.

- \* New Yorkers are almost twice as likely as people elsewhere to report having experienced an array of symptoms commonly associated with depression (9 percent in New York vs. 5 percent nationally), anxiety (6 percent in New York vs. 3 percent nationally), and post-traumatic stress (12 percent in New York vs. 5 percent nationally).

- \* New Yorkers who say their mental health has declined are also twice as likely as those nationally to cite September 11th for their feelings of depression or anxiety.

- \* At a more basic level, 40 percent of New York area residents – twice the national average – say they “get nervous when they hear sirens or airplanes overhead.”

People who report having experienced past traumatic incidents – being in combat, abuse as a child, life-threatening accidents – are also significantly more likely to report symptoms commonly associated with depression, anxiety and post-traumatic stress.

“It would be a mistake to assume that time is healing everyone’s emotional wounds at the same rate,” said Bill Lichtenstein, executive producer of The Infinite Mind radio series. “This research indicates that there is a significant ‘trauma gap’ right now in the United States. We need to make sure that all Americans get the help they need to move ahead with their lives.”

The survey shows that people are reaching out for mental health services, but many of those directly affected by the terrorist attacks have not been to mental health professionals or even considered going.

- \* Seven percent of Americans say they have gone to a mental health professional as a direct result of September 11th.

\* A similar proportion says they have taken prescription medications as a direct result of the attacks – up noticeably from similar measures prior to the events.

\* However, only 1 in 5 people who say they are feeling depressed or anxious as a direct result of the terrorist attacks report having seen a mental health professional, and only 3 in 10 say they have considered it.

Residents in the Washington, D.C area are far less likely than New Yorkers – and even those elsewhere in the nation – to report feeling depressed or anxious. Washingtonians seem less introspective and personally affected by the attacks than the rest of the nation.

\* Almost one-quarter of Americans report feeling more depressed or anxious now than at other times in their lives (27 percent in New York), but only 16 percent in the Washington area.

\* Washington area residents are also far less likely than those in New York to report having an array of symptoms commonly associated with depression (3 percent in Washington vs. 9 percent in New York), anxiety (1 percent in Washington vs. 6 percent in New York), or post-traumatic stress (3 percent in Washington vs. 12 percent in New York).

\* Thirty-eight percent of Washington area residents say that they have spent more time trying to gain perspective on their lives, compared to 71 percent of those nationally and 67 percent of New York area residents.

A report on the research will kick off The Infinite Mind special two-hour town hall broadcast “State of Mind: America 2002.” The program, taped simultaneously before live audiences at the National Press Club in Washington, D.C. and at the Museum of Television & Radio in New York City, explores the mental health and emotional well-being of the nation. The broadcast is hosted jointly by Dr. Fred Goodwin, former director of the National Institute of Mental Health and a distinguished clinician and research scientist, and by John Hockenberry, noted television and radio journalist. Participants include U.S. Surgeon General Dr. David Satcher, former First Lady Rosalynn Carter, Tipper Gore, psychiatrist and author Dr. Peter Kramer, noted clergyman William Sloane Coffin, and Marian Wright Edelman of the Children’s Defense Fund, with special musical performances by opera star Jessye Norman and singer/songwriter Judy Collins.

The American Psychological Association (APA), located in Washington, DC, is the largest scientific and professional organization representing psychology in the United States and is the world’s largest association of psychologists. APA’s membership includes more than 155,000 researchers, educators, clinicians, consultants and students. Through its 53 divisions and its affiliations with 60 state, territorial and Canadian provincial associations, APA works to advance psychology as a science, as a profession, and as a means of promoting human welfare.

The Infinite Mind public radio program airs weekly in more than 170 markets across the United States and Canada. Produced by the Peabody Award-winning Lichtenstein Creative Media, the program is hosted by Dr. Fred Goodwin with weekly commentaries by John Hockenberry. Major underwriting for The Infinite Mind is provided by the National Science Foundation, the National Institute of Mental Health and the John D. and Catherine T. MacArthur Foundation.

Greenberg Quinlan Rosner Research is a world-renowned public opinion and strategic research company that works for issue organizations, political campaigns and

companies across the globe. The firm, based in Washington D.C., has more than two decades experience examining social currents and issues in the United States. Greenberg Quinlan Rosner has conducted extensive research into the after-effects of the September 11th attacks, particularly the mental health consequences.

1 The survey includes a random sample of 1,500 people nationwide, and an additional 400 interviews in the New York and Washington, D.C. areas. The results for the national sample are subject to a margin of error of +/- 2.5 percent. Results for the New York sample are subject to a margin of error of +/- 5.9 percent and those for D.C. are subject to a margin of error of +/- 6.6 percent.

2 These designations should not be interpreted as clinical diagnoses; they are designed merely to highlight patterns of each mental health problem. To be included in the depression category in the survey, a respondent must have said that they are feeling depressed or depressed and anxious compared to other times in their lives and have experienced 5 or more individual symptoms of depression of 10 presented in the survey. For anxiety, a respondent must have said they are feeling anxious or depressed and anxious compared to other times in their lives and have experienced 6 or more individual symptoms of anxiety of 12 presented in the survey. For post-traumatic stress, a respondent must have experienced a prior traumatic experience in their lives that they classified as "traumatic" and have experienced 6 or more individual symptoms of post-traumatic stress out of 18 presented in the survey.

The survey was also supported in part by the National Mental Health Awareness Campaign, a nationwide, anti-stigma, public education campaign announced jointly by President Clinton and Tipper Gore in June 1999 as part of the first-ever White House Conference on Mental Health.

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# The Boston Globe

## In its eighth year, public radio's 'The Infinite Mind' continues its exploration of the thought process

By Mark Feeney, Globe Staff  
May 9, 2005

CAMBRIDGE -- There being nothing site-specific about thought, the human mind is highly portable.

That's also true of "The Infinite Mind," the public radio show on brain science, mental health, and human behavior, which last month celebrated its eighth anniversary. It airs on 240 stations nationally. WUMB-FM (91.9) is its local outlet.

For its first seven seasons, "The Infinite Mind" originated in New York. That's where the show's creator, Bill Lichtenstein, and its executive producer, June Peoples, lived. Lichtenstein and Peoples, who are married and both 48, had been considering a move from Manhattan.

"I think we woke up one day," Peoples says with a laugh, "and said, 'We own the company. We can work wherever we want.' And Boston just seemed alluring."

So now they and their 5-year-old daughter live in Lexington. Their production company, Lichtenstein Creative Media, is in a Kendall Square office building, and that's where "The Infinite Mind" originates.

A Newton native, Lichtenstein has local roots. "Radio is my first love in media," he says, and that love first manifested itself at WBCN. He started volunteering at the FM station when he was 14, answering phones for legendary announcer Charles Laquidara. Soon he was doing news reports and working as a weekend overnight announcer.

At Brown University, Lichtenstein didn't give up radio. He continued to work summers at WBCN and was program director at Brown's student-run station, WBRU.

After graduating from Columbia Journalism School, Lichtenstein switched media. ABC was just starting its prime-time television news magazine "20/20," and Lichtenstein was hired to work on investigative stories -- "very mainstream, muckraking, follow-the-buck journalism," he says.

In 1986, Lichtenstein was diagnosed with manic depression and was unable to work for the next four years. The experience changed him personally -- and professionally. He realized, he says, "There were issues out there [concerning mental health] that somehow affect everybody that weren't being addressed. To a journalist, that's a very interesting thing."

Returning to radio, he produced three one-hour documentaries for public radio, "Voices of an Illness." The documentaries won awards, including a prestigious George Foster Peabody Award, and helped pave the way to "The Infinite Mind."

Peoples's involvement in mental health issues wasn't so hard won. A native of Bucks County, Pa., she worked as a reporter and editor for newspapers and the Associated Press in New York City and upstate. She remained a print journalist after she and Lichtenstein married. "I was one of these snooty reporters who thought 'broadcast news' was a contradiction in terms," she says with a laugh.

Yet when Lichtenstein was looking for a producer for one of the documentaries, Peoples surprised herself by volunteering. He agreed, and she's been in radio ever since.

Both Lichtenstein and Peoples say that one of the things that distinguishes "The Infinite Mind" is its broad approach. "Each week, 'The Infinite Mind' takes on an issue that in some way relates to human mind," Lichtenstein says. "It can be medical, it can be social. It

can be metaphysical. We spend an hour examining it from as many perspectives as we can, so that at the end of the hour you understand that subject in a way you didn't before. It can range from a medical issue, like multiple sclerosis, to something like left-handedness or dopamine or writer's block."

This season "The Infinite Mind" has a new host, Peter Kramer. A psychiatrist who teaches at Brown, Kramer is the best-selling author of "Listening to Prozac." His latest book is "Against Depression."

"I feel lucky Bill and June have put this together and the show exists," Kramer says. "The Infinite Mind' has a public health function, and it's a broad one. Just talking about mental illness is useful. I also think it's useful not to talk about it exclusively but in the context of lots of aspect of mind and brain. There's real value in making mental illness ordinary."

Lichtenstein, who also makes documentary films, recently was awarded a Guggenheim fellowship for a film on at-risk juveniles in the social-welfare system. "The Infinite Mind" remains his priority, though, and he doesn't see the show slowing down any time soon.

"We have too many ideas," he says. "Unlike other parts of the body, where the more research they do the more they understand it -- like the heart -- with the brain every time they get a new insight it opens up 10 questions."

"The Infinite Mind" is broadcast locally on WUMB-FM (91.9) Sundays at 6 a.m. and 8 p.m.

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## Medicine

# The Souls That Drugs Saved

By JAMES WILLWERTH/LOS ANGELES

Monday, Oct. 10, 1994



Anyone who believes that drugs can't help the mentally ill should listen to Dr. Murray Frances. The 44-year-old physician recovered from 20 years of severe schizophrenia after taking the drug Clozapine. As Frances explains in *Schizophrenia: Voices of an Illness*, a remarkable documentary that will air on National Public Radio stations this week, even her hallucinatory inner voices somehow understood that medicine was their enemy. "You're not going to take that!" they screamed years earlier when doctors urged her to take the medication Haldol. "Do you want us to go away?" Frightened, Frances resisted that drug and others; she remained ill for another 17 years.

Psychiatric patients are generally insulted by contentions that their trouble was brought on by bad parenting, childhood trauma or weak character -- that they don't actually have a disease. While experts agree that family problems and other external factors can exacerbate mental illness, most have long ago concluded that the underlying causes are often biological and genetic. None of the recovered patients in the NPR documentary blame family woes. In fact, the illness caught many without warning. "I was looking up at the sky, and suddenly it cracked like a mirror, in a thousand pieces," recalls Laura Young, 31. "I don't know why I didn't realize it was an incredibly strong signal that something was wrong with my mind."

The schizophrenia program is the second documentary in a series on mental illness developed by **Bill Lichtenstein**, a former producer for the ABC-TV show *20/20*. His choice of subject matter had personal meaning: he came down with manic-depressive disease in 1986 and spent four years "struggling with the illness to get it under control medically." After getting better -- Lichtenstein is on the drug Tegretol -- he founded Lichtenstein Creative Media in New York City. Fittingly, his first project was a 1992 *Voices* program for NPR on manic depression. It was narrated by Patty Duke, who also suffered from the disease. Jason Robards offered to narrate the current schizophrenia program, volunteering that his first wife had been institutionalized for that illness.

The series offers a unique window on the interplay of sophisticated new medicines and patients' agonizing struggles to recover. Though sufferers appear withdrawn and disoriented, they are often painfully aware of themselves. "The person with schizophrenia has literally no emotional strength," explains Brandon Fitch, 21, a recovered patient who adds happily that medication has "liberated me from quite a few of my symptoms." Psychiatrist Wayne Fenton, who treated Murray Frances, laments that people who see a schizophrenic behaving strangely often assume that the patient "is someone who doesn't have feelings, who doesn't have a memory, who doesn't experience pain." Pioneering researcher Dr. John Kane points out that new drugs have helped patients whose families and doctors "had kind of given up."

Lichtenstein's work and own experience have made him a staunch defender of drug therapy. "Mental illness is not something you can take or leave," he concludes. "Medication was at the heart of my treatment." Without such help, many people with mental diseases try suicide, according to the documentary. "I don't know anyone," says recovered schizophrenia patient Cathy Roemke, 41, "who hasn't felt like it." The attempts often occur, therapists say, after patients decide they no longer need their "meds."

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# Telling Our Stories

(This article was first published in 1995, in The Journal of California NAMI)

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by Bill Lichtenstein

I am a documentary producer, a journalist who has made a living out of helping people tell their stories. I did it for more than 20 years before I got sick. I worked as an investigative reporter, including seven years at ABC News where I produced segments for 20/20, Nightline, and World News Tonight. I did stories about organized crime connections to the Reagan administration, abused children in state juvenile institutions and exploding automobile gas tanks. Then, in 1986, my own world exploded.

The symptoms of my manic depression were classic: overwhelming energy, extreme euphoria, racing thoughts, irritability, months of depression. I searched through many doctors and a hospitalization for someone who could explain what was happening to me. For years, no one could.

Finally a psychiatrist at McClean Hospital in Boston made the proper diagnosis, put me on medication, and gave me back my life. To understand that what was happening to me was a result of an illness an illness that was readily treatable offered great comfort. But I had so many questions that remained unanswered. What had caused it? Did it result from something I did, some aspect of my lifestyle or upbringing? Would medication change me deprive me of the spark and creativity that were a part of me and critical to my work as a journalist? Was my experience with the illness unusual? Could I stop 'taking the medicine, and control the illness with sheer willpower? What about close friends and co workers who did not understand manic depression and had distanced themselves from me? How could I communicate to others what this extraordinary roller coaster ride had been like? Would they ever understand what I had gone through? I was one of 1.5 million Americans with manic depression, but I felt all alone.

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**Having lived with the symptoms of manic depression for so long, I'd come to believe that they were part of me...**

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It's the problem virtually everyone with mental illness faces. It's not that people around me didn't care. They just didn't understand why I had changed so dramatically, becoming unpredictable, confused and sometimes difficult. Before they would be able to reach out to me with empathy, support and compassion, they needed to understand what I had gone through.

For me, that meant learning to tell my story, and I did that by helping others to tell theirs. Over the past five years, my company, Lichtenstein Creative Media, Inc., has produced a series of one hour radio documentaries called "Voices of an



Illness," featuring first-person accounts of people describing what it's like to live with and recover from manic depression, depression and schizophrenia.

Following my diagnosis, I started my search for answers where most people would begin at, the bookstore. I looked for anything that might provide insight into living with and recovering from the illness. There was nothing. (At the time Patty Duke's inspiring book "A Brilliant Madness: Living with Manic Depressive Illness" which details her struggle with the mood disorder had not yet been written, nor had Kathy Cronkite's remarkable "On the Edge of Darkness.") Furthermore, film and radio documentaries about mental illness focused primarily on people in the throes of the disorders, with dramatic and often frightening pictures of symptoms but little sense of what the people felt inside. Those in the midst of a mental illness are in no condition to describe their experience in a thoughtful, compelling or insightful manner, nor offer hope for recovery.

In the absence of any book or documentary that could help me, I decided to create my own, and developed "Manic Depression: Voices of an illness," narrated by Patty Duke, the 1992 radio documentary which was to become the first in the Voices of an Illness series.

The initial \$400 in seed money for the program came in the summer of 1990 from members of the Manic Depressive and Depressive Support Group of New York, in \$10 and \$20 contributions. With the help of Bob Boorstin, who had also recovered from manic depression (and has since gone on to work in the White House) I wrote and circulated a one page funding proposal to potential underwriters national mental health groups, foundations, concerned individuals and pharmaceutical companies. The support came quickly. Within two months, I had raised most of the money for the two year research and production of the program.

I found people around the country who had recovered from manic depression professional people, including a Fortune 500 executive, a therapist, a registered nurse, a financial advisor and a salesman. They described in detail every aspect of the illness's effect on their lives from its onset through their recovery. I also was extremely fortunate to gain assistance from top mental health clinicians, researchers and advocates, including Dr. Frederick K. Goodwin, Dr. Robert Post, Dr. William Potter and Dr. Elliot Gershon, all of the National Institute of Mental Health; Dr. Kay Jamison of Johns Hopkins University School of Medicine and Laurie Flynn of the National Alliance for the Mentally Ill. They were generous with their time, answered questions ranging from the simplistic to the philosophical and helped provide a broader context about the medical and social aspects of the illness. On a personal level, it was like having the world's largest support group.

Having lived with the symptoms of manic depression for so long, I'd come to believe that they were part of me: that the short attention span was a character flaw, that irritability was a function of personality, and that the overwhelming energy level was "just the way I was." It was hard for me to understand and accept that many of the effects of manic depression were, in fact, symptoms. The people with manic depression and the doctors validated my experiences with the illness. When computer programmer Joe Valencik talked about hypomania, he could have been talking about me:

"Normal people have this thing called adrenaline that comes on and off and it's a switch. So when they come into a situation like I am in now, with this interview, it comes up and they get this buzz. And they feel it, and they're pumped up, and that's the normal, healthy way. And then it goes away, you know, when they leave. But for people that have the illness and are in that hypomanic stage that doesn't go away, it's just there. It's there when you go to sleep and you're trying to close your eyes and sleep, but your thoughts are still going. You can't even sleep."

Producing the show, I first learned of the relationship between manic depression and creativity from Dr. Kay Jamison's work. It was inspiring to know that far from being doomed by the illness, it actually has positive aspects. In a 1990 speech, she talked about the symptoms:

"It's kind of like who wouldn't want this disease? Right? I mean, you are talking about decreased need for sleep, more energy than usual, inflated self esteem, increased productivity, This Is my favorite one here sharpened and unusually creative thinking. This is listed as a symptom of psychopathology. Uninhibited people seeking hypersexuality. It's hard to come out against any o f these things, I mean. And the question is, you know, who wouldn't want it? How can you bottle it? How can you sell it?"

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Although my own personal experiences with the social stigma attached to the illness were not as severe or dramatic as those of school teacher Mike Mayfield, his experiences with his girlfriend's family touched a nerve:

"You know, I came to the window and the first to arrive at our townhouse was Mary's mother. Moments later, Mary's father arrived. Two minutes later, Mary was out the door, engaged in a big argument with both her mother and her father. And I looked out, you know, to the neighborhood and people were coming to the doors. The voices had grown so loud that I could hear, Berserker! Berserker! You know, You're living with a madman, Mary! What are you doing? You know, 'He's unsafe. It's unsafe for your children, unsafe for you.' You know, Leave him!"

Producing the show was tremendously empowering and validating. I began to feel I was not alone, either in what I had gone through while I was ill or in my personal struggles with the social stigma of the illness.

The response to the show was overwhelming. Tens of thousands of listeners called seeking help and support from the national mental health groups whose phone numbers we provided at the end of the show. National Public Radio audience services reported an "unprecedented listener response." One woman called a radio station to say she was in her car on her way to take her own life, heard the show, and decided to seek help instead.

We also received a call from an underwriter who suggested a second show, on schizophrenia. The timing was right. A new generation of medications was allowing hundreds of thousands of people previously untreatable to return to their daily lives.

In 1994, "Schizophrenia: Voices of an Illness," narrated by Jason Robards, detailed the often incomprehensible symptoms and social stigma associated with the thought disorder. For people with schizophrenia and their families, the program let them know they were not alone with the mysterious and often terrifying symptoms of the illness. Laura Young, who today is an art therapist, described the onset of her schizophrenia, which as often happens, came on suddenly:

"I was walking across the campus at Yale in spring of my freshman year, and I was looking up at the sky, and suddenly it cracked like a mirror into thousands of pieces. I don't know why I didn't realize that that was an incredibly strong signal that something was wrong with my head and that I needed help."

The show tried to demystify one of the most frightening aspects of the illness hearing voices. Murray Frances described her symptoms in extraordinary detail: "I heard a woman's voice and I no longer remember exactly what she said, but it was something like: 'I want you to know that you have been chosen. You are select, you are special. We're going to take care of you. We're going to give you great powers. We are a group of very important Lords, and we are going to make you a special person. You're not like any mortal on this earth. You're going to save the earth, in fact.' And... there it is! Which sounds nuts, and was! I didn't tell

anyone any of this. Nobody knew, my parents certainly didn't know. And I remember that feeling of being absolutely apart and different, and not like this family I'd grown up in, that now had suddenly become strangers."

For Murray Frances and thousands like her, new medications meant the difference. Today, she has graduated from medical school and is a psychiatrist working with people with schizophrenia.

The power of the show, in large part, was due to the fact that these people had never before told their stories. No one had ever asked them to describe what the illness felt like even though some of them were ill and in treatment for decades. In fact, one leading doctor who treated a woman for seven years said he was totally unaware of his patient's extraordinary experiences. For her, it was a relief to finally talk about what she'd gone through. For the listening audience, it provided a window on this most misunderstood thought disorder.

The third show in the Voices of an Illness series is on depression. It will be narrated by Rod Steiger, and will air in the fall of 1995 on NPR stations across the country. "Depression: Voice of an Illness" will focus on the mood disorder which affects one out of six Americans, and twice as many women as men. Although the onset and symptoms of the illness are not as dramatic as those of schizophrenia and manic depression, the sheer numbers of people suffering from the wide variety of clinical depressions make it a program that can touch a far greater audience.

The show will highlight that clinical depression is a diagnosable biochemical illness which is different than sadness or the blues and that it is readily treatable. Eighty five percent of people with clinical depression can recover. The program will also feature new clinically tested medications and talk therapies shown effective in treating depression. By doing so, the documentary will hopefully help lift the national shroud of shame surrounding

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the illness, and encourage those affected to seek treatment. Again, people who have recovered from the illness form the basis for the show.

If these programs have proven anything, it is the extraordinary power of a simple story. Thus far, the series has won 15 major broadcast and mental health awards. I was pleased when Time Magazine called the schizophrenia program "a remarkable documentary," in an article which ran under the headline "The Souls that Drugs Saved" opposite a story exposing Dr. Peter Breggin's attack on medication therapy.

In May, the schizophrenia show received the 1994 George Foster Peabody Award for Excellence in Broadcasting, television and radio's highest honor. But most important is the fact that the programs have provided a life line: tens of thousands of listeners have responded with calls for help that were answered by the National Alliance for the Mentally Ill, the National Mental Health Association, the National Depressive and Manic Depressive Association, the National Alliance for Research on Schizophrenia and Depression, the National Foundation for Depressive illness and their more than 2,000 local affiliates across the country. The general public more often than not sees mental illness in the form of those who are ill on the streets or in the media. Those who have recovered and are in the best position to speak out usually don't, fearing the stigma attached to these illnesses. But, once others can understand, they are in a better position to offer assistance, support, empathy and compassion.

As Mike Wallace said in Kathy Cronkite's book, *On the Edge of Darkness*: "People who don't know [what depression is], who say it's selfindulgence, sound callous, but it's not callousness born of indifference; I think it's callousness born of ignorance. That kind of ignorance we've got to get rid of, and little by little I suppose, we will. You say to them, It's a pity you don't know. I'm sure that if you knew, I'm sure that if you knew, not only wouldn't you say that, you'd try to help in one way or another."

For myself and those who participate in the documentaries, it is empowering to speak out about mental illness. It helps provide validation, hope and the means to recover. Not to speak out is to live a lie, in the closet. By speaking out about your own experiences, it empowers all of us, and helps break down stigma. It is the most powerful action any of us can take. Add your voice and tell your story.

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